57th Legislature SB0415.01

1	SENATE BILL NO. 415
2	INTRODUCED BY J. COBB
3	
4	A BILL FOR AN ACT ENTITLED: "AN ACT PROVIDING FOR DIRECT PAYMENT TO HEALTH CARE
5	PROVIDERS BY HEALTH INSURERS, HEALTH SERVICE CORPORATIONS, AND HEALTH MAINTENANCE
6	ORGANIZATIONS; AMENDING SECTIONS 33-22-212 AND 33-22-505, MCA; AND PROVIDING AN
7	APPLICABILITY DATE."
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9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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11	Section 1. Section 33-22-212, MCA, is amended to read:
12	"33-22-212. Payment of claims. (1) There shall must be a provision as follows:
13	"Payment of Claims: Indemnity for loss of life will be payable in accordance with the beneficiary
14	designation and the provisions respecting such the payment which that may be prescribed herein in this
15	$\underline{\text{provision}} \text{ and effective at the time of payment. If } \underline{\text{no such }} \underline{\text{a}} \text{ designation or provision is } \underline{\text{then }} \underline{\text{not}} \text{ effective,}$
16	$\dfrac{\text{such }\underline{\text{the}}}{\text{indemnity }\underline{\text{shall }\underline{\text{must}}}}$ be payable to the estate of the insured. Any other accrued indemnities
17	unpaid at the insured's death may, at the option of the insurer, be paid either to such the beneficiary or
18	to such the estate. All other indemnities will be payable to the insured."
19	(2) The following provisions, or either of them, Either or both of the following provisions may be
20	included with the foregoing provision in subsection (1) at the option of the insurer:
21	"If any indemnity of this policy shall be is payable to the estate of the insured or to an insured or
22	beneficiary who is a minor or otherwise not competent to give a valid release, the insurer may pay such
23	the indemnity, up to an amount not exceeding \$ (insert an amount which shall that may not exceed
24	\$1,000), to any relative by blood or connection by marriage of the insured or beneficiary who is deemed
25	considered by the insurer to be equitably entitled thereto to the indemnity. Any payment made by the
26	insurer in good faith pursuant to this provision shall fully discharge discharges the insurer to the extent of
27	such the payment.
28	Subject to any written direction of the insured in the application or otherwise, all All or a portion
29	of any indemnities provided by this policy on account of hospital, nursing, medical, or surgical, dental, or
30	other covered services may, at the insurer's option and must unless the insured requests otherwise in

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writing not later than the time of filing proof of such loss, be paid directly to the hospital or person rendering such the services; but. However, it is not required that the service be rendered by a particular hospital or person."

**Section 2**. Section 33-22-505, MCA, is amended to read:

"33-22-505. Direct payment of hospital and medical services. Any A group disability policy may on request by the group policyholder must provide that all or any portion of any indemnities provided by any such a policy on account of hospital, nursing, medical, or surgical, dental, or other covered services may, at the insurer's option, must be paid directly to the hospital or person rendering such the services; but. However, the policy may not require that the service be rendered by a particular hospital or person. Payment so made shall discharge as provided discharges the insurer's obligation with respect to the amount of insurance so paid."

<u>NEW SECTION.</u> Section 3. Direct payment of provider services. Each evidence of coverage that is delivered, issued for delivery, renewed, extended, or modified in this state by a health maintenance organization, health insurer, or health service corporation must contain a provision that all or any portion of any indemnities provided on account of provider services must be paid directly to the provider rendering the services regardless of participation in a provider panel.

<u>NEW SECTION.</u> **Section 4. Codification instruction.** [Section 3] is intended to be codified as an integral part of Title 33, chapter 31, part 3, and the provisions of Title 33, chapter 31, part 3, apply to [section 3].

NEW SECTION. Section 5. Applicability. [This act] applies to all policies, agreements, contracts, or evidence of coverage issued or renewed on or after January 1, 2002.

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